



Revised 232043

2010.374.T

## CLASS C AMENDMENT FORM

## File the original with:

Public Service Commission of South Carolina  
Clerk's Office  
Motor Carrier Matters  
P.O. Box 11649  
Columbia, S.C. 29211  
(803) 896 - 5100  
FAX (803) 896-5199

## Mail or fax a copy to:

S.C. Office of Regulatory Staff  
Transportation Department  
1401 Main Street, Suite 900  
Columbia, S.C. 29201  
(803) 737-0578  
FAX (803) 737-0815

DATE: 9.6.11

I have the following Certificate:

☐ Class C Taxi # \_\_\_\_\_ ☐ Class C Charter # \_\_\_\_\_ ☐ Class C Charter Bus # \_\_\_\_\_☒ Class C Non-Emergency # 8355

Please consider this as my request for the following amendment(s) to my Certificate:

☐ Name Change

From: CARE + SAFETY Transportation LLC (Current Name) DBA: \_\_\_\_\_ (Current DBA if applicable)

TO: CARE + SAFETY Transportation LLC (New Name) DBA: \_\_\_\_\_ (New DBA if applicable)

☐ Scope of Authority

From: Dorchester, Beatty, Charleston (Current Scope) To: Beaufort, Colleton, Charleston (New Scope)

☐ Passenger Limit

From: \_\_\_\_\_ (Current Limit Number) To: \_\_\_\_\_ (New Limit Number)

Name &amp; DBA if DBA is applicable)

S.T. Helena Is. 29920  
(City, State, Zip Code)

(843) 476-3730  
(Telephone Number)

21 Oak Plantation  
(Street and/or Mailing Address)

Wendell Gregory  
(Signature)

(Title) Owner, President, etc.